

Docket No.:__

As a below named inventor, I hereby declare that:
My residence, post office address and citizenship are as stated below next to my name; that
I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMAGE FORMING APPARATUS AND SHEET SUPPLY UNIT FOR USE IN THE SAME

described and claimed	in the specific	ation:			
Check one					
b. filed on as Application Serial No and					
	ided on	·			
(11 ap I hereby sta	plicable) ate that I have	reviewed and understand	the contents of the above-	identified application, including the	
claims, as amended by any amendment referred to above.					
I acknowle defined in Title 37, Co			all information known to m	ne to be material to patentability as	
Under Title provisional application	: 35 U.S. Code (s) filed within	s § 119, the priority bene n one year prior to this ap	fits of the following foreign plication are hereby claimed	a application(s) and/or United States:	
Japanese Pat	ent Applicati	ion No. 11-341201, fil	ed on November 30, 199	99	
the United States of A	merica either (a(s) for patent or inventor (a) more than one year pr and/or United States prov	ior to this application, or (b)	on were filed in countries foreign to before the filing date of the above-	
the Customer Number Office connected there	provided belowith, and direc	ow to prosecute this appli ct that all correspondence		Lewis & Bockius LLP included in usiness in the Patent and Trademark ler Number.	
Customer	Number: 00	9629			
herein of my own known further that these state by fine or imprisonment	owledge are troments were madent, or both, to	ue and that all statement ade with the knowledge t under Section 1001 of T	s made on information and hat willful false statements	aration, and that all statements made belief are believed to be true; and and the like so made are punishable as Code and that such willful false	
statements may jeopate	dize the validit	y or and approaction or an	•		
Typewritten Full Name	e		•	Sacanka	
7,7	e	Yoshimasa	Middle Initial	Sasaoka Family Name	
Typewritten Full Name of Sole or First inventor	e or:	Yoshimasa Given Name	Middle Initial	Family Name	
Typewritten Full Name of Sole or First inventor **Inventor's Signature	e or:	Yoshimasa	•	Family Name Sasaoka	
Typewritten Full Name of Sole or First inventor	e or:	Yoshimasa Given Name <i>Yoshimosa</i> 9	/ 13 ,	Family Name Sasaoka Z 000	
Typewritten Full Name of Sole or First inventor **Inventor's Signature	e or:	Yoshimasa Given Name Yoshimosa 9 Month	•	Family Name Sasaoka	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature:	e or: e:	Yoshimasa Given Name Yoshimosa 9 Month K	/ /3 , Day	Family Name Sasaoka Z 000 Year	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature:	e or: e: Ebina-shi	Yoshimasa Given Name Yoshimosa 9 Month K	////////////////////////////////////	Family Name Sasaoka Z 000 Year Japan	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature: Residence: Citizenship: Post Office Address:	e or: e: Ebina-shi	Yoshimasa Given Name Yoshimasa 9 Month K	Day anagawa ute of Province	Family Name Sasaoka Z 000 Year Japan	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature: Residence: Citizenship:	e or: e: Ebina-shi	Yoshimasa Given Name Yoshimasa 9 Month K Sta	Day anagawa ate of Province	Family Name Sasaoka Z 000 Year Japan	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature: Residence: Citizenship: Post Office Address: (Insert complete mailing	e or: e: Ebina-shi	Yoshimasa Given Name Yoshimasa 9 Month K Sta Japan c/o Fuji Xerox Co., I	Day anagawa ate of Province	Family Name Sasaoka Z 000 Year Japan	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature: Residence: Citizenship: Post Office Address: (Insert complete mailing address, including country)	e or: :: Ebina-shi City	Yoshimasa Given Name Yoshimasa 9 Month K Sta Japan c/o Fuji Xerox Co., L Ebina-shi, Kanagawa	Day anagawa ate of Province atd., 2274, Hongo, at, Japan	Family Name Sasaoka Z 000 Year Japan Country	
Typewritten Full Name of Sole or First inventor **Inventor's Signature: **Date of Signature: Residence: Citizenship: Post Office Address: (Insert complete mailing address, including country) *This form may be executed.	Ebina-shi City	Yoshimasa Given Name Yoshimasa 9 Month K Sta Japan c/o Fuji Xerox Co., I Ebina-shi, Kanagawa en attached to the specific	Day anagawa ate of Province atd., 2274, Hongo, a, Japan cation (including claims) at t	Family Name Sasaska Z 000 Year Japan Country he end thereof if Box a. is checked.	
Typewritten Full Name of Sole or First inventor **Inventor's Signature **Date of Signature: Residence: Citizenship: Post Office Address: (Insert complete mailing address, including country) *This form may be exe **Note to Inventor:	e bor: Ebina-shi City ecuted only whe	Yoshimasa Given Name Yoshimasa 9 Month K Sta Japan c/o Fuji Xerox Co., I Ebina-shi, Kanagawa en attached to the specificate exactly as it appears above	Day anagawa ate of Province atd., 2274, Hongo, at, Japan	Family Name Sasaoka Z 000 Year Japan Country the end thereof if Box a. is checked. te of signing.	